P E Docket No.: 43890-467

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of

: Response Under 37 CFR 1.116 - Expedited Procedure

Suzushi KIMURA, et al.

:

Serial No.: 09/719,631

Group Art Unit: 2827

Filed: February 12, 2001

Examiner: TUAN T. DINH

For:

MODULE COMPONENT AND METHOD OF MANUFACTURING THE SAME

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

No additional fee is required.

Applicant is entitled to small entity status under 37 CFR 1.27 Also attached: Request For Continued Examination (RCE)

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE	
Total Claims	26	26	0	\$18.00 =	\$0.00	
Independent Claims	10	10	0	\$84.00 =	\$0.00	
		Multiple claims ne	\$0.00			
		Fee for extension of	Fee for extension of time Request For Continued Examination			
		Request For Contin				
		Ì	\$1160.00			

Please charge my Deposit Account No. <u>500417</u> in the amount of \$1160.00. An additional copy of this transmittal sheet is submitted herewith.

The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 500417, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

MCDERMOTT, WILL & EMERY

Michael E. Fogarty Registration No. 36,139

600 13th Street, N.W. Washington, DC 20005-3096 (202) 756-8000 MEF:men Facsimile: (202) 756-8087

Date: July 7, 2003



PATENT ATTORNEY DOCKET NO. 43890-467

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Suzushi KIMUR	A, et al.
-------------------------------------	-----------

Serial No.: 09/719,631 Group Art Unit: 2827

Filed: February 12, 2001 Examiner: K. CUNEO

For: MODULE COMPONENT AND METHOD OF MANUFACTURING THE SAME

AMENDMENT TRANSMITTAL

Honorable Commissioner of Patents and Trademarks, Washington, D.C. 20231

Sir:

1. X Transmitted herewith is an amendment for the above-identified application.

STATUS

- 2. X Applicant is ___ is small entity verified statement: attached ___ already filed.

 X other than a small entity.
- EXTENSION OF TIME
- 3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.
 - (a) ____ Applicant petitions for an extension of time for the total number of months checked below:

(months)	 FOR ENTITY	SMALL ENTITY			
one month two months three months four months	\$ 55.00 205.00 465.00 725.00	\$ 110.00 410.00 930.00 1,450.00			

Fee \$____

If an additional extension of time is required, please consider this a petition therefor.

An extension for ___ months has already been secured and the fee paid therefor of ___ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this Request \$

(b) X Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

Claims Remaining Number After Previously Present Rate : Pee Total : : : : : : : : : : : : : : : : : : :	4. <u>X</u>	The fee for claims has been calculated as shown below:						
Remaining After After After Previously Present Rate : Pee Total Claims : 26 : 26 : 0 : x \$ 18.00 = : 0.00 Independent : 10 : 0 : x \$ 84.00 = : 0.00 Independent : 10 : 0 : x \$ 84.00 = : 0.00 Multiple Dependent Claims (first presentation) : \$280.00 = : 0.00 Multiple Dependent Claims (first presentation) : \$280.00 = : 0.00 Reduction by % for : Total Reduction by % for : small entity : - 0 TOTAL FEE : \$ 0.00 (a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$ FEE PAYMENT 5 Attached is a check in the amount of \$. _ Charge Deposit Account No. 50-0417 the amount of \$ _ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY		Claims Highest						
## Total Faid For Extra Rate Fee Total								
Total : : : : : : : : : : : : : : : : : : :								
Claims : 26 : 26 : 0 : x \$ 18.00 = : 0.00 Independent : : : : : : : : : : : : : : : : : : :		: Amendment : Paid For : Extra : Rate : Fee						
Independent: Claims: 10: 10: 0: x \$ 84.00 =: 0.00 Multiple Dependent Claims (first presentation): \$280.00 =: 0.00 Total =: 0.00 Reduction by % for small entity :- 0 TOTAL FEE : \$0.00 (a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$ FEE PAYMENT 5 Attached is a check in the amount of \$. Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
Claims : 10 : 10 : 0 : x \$ 84.00 = : 0.00 Multiple Dependent Claims (first presentation) : \$280.00 = : 0.00								
Multiple Dependent Claims (first presentation): \$280.00 = : 0.00 Total = : 0.00 Reduction by % for : small entity : - 0 TOTAL FEE : \$0.00 (a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. _ Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
Reduction by % for :		· · · · · · · · · · · · · · · · · · ·						
Reduction by % for small entity : - 0 TOTAL FEE : \$ 0.00 (a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. _ Charge Deposit Account No. 50-0417 the amount of \$ accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY	Multiple De							
small entity : - 0 TOTAL FEE : \$ 0.00 (a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. _ Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
(a) X No additional fee for claims is required. -OR- (b) The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
(a) X No additional fee for claims is required. OR- (b) The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
The total additional fee for claims required \$. FEE PAYMENT 5 Attached is a check in the amount of \$. Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X		10141 188						
FEE PAYMENT 5 Attached is a check in the amount of \$ Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X	(a)	X No additional fee for claims is required.						
5 Attached is a check in the amount of \$ Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY		-OR-						
Attached is a check in the amount of \$. Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY	(b)	The total additional fee for claims required \$.						
Charge Deposit Account No. 50-0417 the amount of \$ A duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X	FEE PAYMENT							
duplicate copy of this Transmittal is enclosed for accounting purposes. FEE DEFICIENCY X If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY	5	Attached is a check in the amount of \$.						
If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY		duplicate copy of this Transmittal is enclosed for accounting						
request therefor and to charge Deposit Account No. 50-0417. AND/OR X If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY	FEE DEFICIE	ENCY						
If any additional fee for claims is required, charge Deposit Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY								
Account No. 50-0417. A duplicate copy of this Transmittal is enclosed for accounting purposes. Respectfully submitted, MCDERMOTT, WILL & EMERY		AND/OR						
MCDERMOTT, WILL & EMERY	Account No. 50-0417. A duplicate copy of this Transmittal is							
11/2		Respectfully submitted,						
11/23		MCDERMOTT, WILL & EMERY						
		11/23						
Michael E rogarty Registration No. 36,139	Date:							

600 13th Street, N.W., Suite 1200 Washington, D.C. 20005-3096 (202) 756-8000

Applica	nt: Suzushi	KIMURA, et a	l				(Docket N	o. <u>4</u>	3890-46	57						
Title: MODULE COMPONENT AND METHOD OF MANUFACTURING THE SAME Serial/Reg./Patent No. 09/719,631																	
Date S	Date Sent: 5/5/2003 And Carried Fax Electronic Cert. of Mailing Express Mail No.																
	ransmittal Letter																
١	lew Patent App	☐ Utility		Design		Cont.		CIP	☐ Di	/. 🔲	PCT		CPA	RCE		Prov	
	Other:								\boxtimes	Letter s	ubmitting	<u>12 pa</u>	iges of	drawings			
	p	ages of Specif	ication							Req. fo	r Approva	al of Dr	awing A	Amendments			
	p	ages of Claims	i							Req. fo	r Oral He	aring					
	p	ages of Abstra	ct							Not. of	Appeal		Appe	eal Brief [☐ Rep	ly Brief	
	p	ages of Forma	l/Informal	Drawings						Rule 31	12 Amend	lment/L	_etter				
	Small Entity	☐ Large	Entity							Req. fo	r Acknow	ledgen	nent of	Cited Art			
	Declaration/Po	wer of Attorney	,							Issue F	ee						
	Recordation of	Assignment/S	ecurity Ag	reement						Publica	tion Fee						
	Information Dis	closure Staten	nent							•	r Certifica						
•	F	om PTO 1449)									_		ears after grant			
	copies of cited references																
	Preliminary Am	endment									al Disclair			/01	FE		
	Response to Missing Parts Notice																
	Resp. to Notice	•	•							Status	Inquiry			L MAN 0		(2)	
	Certified Copy of Priority Doc.																
Response/Amendment to Office Action of 4FEB03 Request for month Extension of Time																	
	Request for	month Ex	tension of	Time				<u> </u>			<u> </u>	— Т		V84DI	W B		
Check	for \$	☐ Ch	arge Depo	sit Acct. 50	0417\$	0		Att	y Init.	MEF	Tkpr.	#	3328	Secy. or PL	: R	Pase	
CMS Descrip.:																	
THE PA	TENT AND TRADE	MARK OFFICE (DATE STA	MPED HERE	ON IS	CKNOV	VLEDGE	MENT TH	AT THE	TEMS, CHE	CKED AB	OVE, W	VERE RE	ECEIVED BY THE	PTO ON	THE DATE STAM	PED.



O P E COLT SE ON THE PROPERTY OF THE PROPERTY

ATTORNEY DOCKET NO. 43890-467 PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	Application of:	
Suzus	hi KIMURA, et al.	Attn: BOX AF
Serial	No.: 09/719,631	Group Art Unit: 2827
Filed:	February 12, 2001	Examiner: K. CUNEO
For:	MODULE COMPONENT AND METHOD OF MANUFACTURING THE SAME))

LETTER SUBMITTING FORMAL DRAWINGS

Hon. Assistant Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Supplemental to the Amendment Under 37 C.F.R. § 1.116 filed concurrently herewith, Applicants submit twelve sheets of formal drawings Figs. 1(a) to 12(b) in the above-identified application.

Respectfully submitted,

McDERMOTT, WILL & EMERY

Date: 1/5/25

By:

Michael E. Fogarty Registration No. 36,139

600 13th Street, N.W., Suite 1200 Washington, D.C. 20005-3096 Telephone: 202-756-8000

Facsimile: 202-756-8087